

# News Release



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## New reports show high STD and HIV rates among African Americans

African Americans in Minnesota become infected with HIV and other reportable sexually transmitted diseases (STDs) more often than most other racial or ethnic groups, according to the latest reports from the Minnesota Department of Health (MDH).

“African Americans are carrying the highest burden of bacterial STDs in our state,” said Peter Carr, director of the STD and HIV Section, Minnesota Department of Health (MDH). “This situation needs to be taken out of hiding and brought to the attention of our affected communities.”

In 2007, Minnesota had a record setting year with a total of 17,057 cases of bacterial sexually transmitted diseases (STDs) such as chlamydia, gonorrhea and syphilis. Within this total, African Americans accounted for 3,797 cases (28 percent) of the 13,412 chlamydia cases and 1,728 cases (50 percent) of the 3,459 gonorrhea cases reported in Minnesota. The infection rates of chlamydia among African Americans were 15 times higher compared to whites. Gonorrhea rates were nearly 40 times higher in African Americans than whites.

“African Americans also have high infection rates for HIV, the virus that causes AIDS,” said Carr. “In addition, we have recently seen a jump in cases among African American males.”

Of the 325 HIV cases reported in 2007, African Americans accounted for 22 percent or 71 of the cases. African Americans had nearly 14 times the infection rate when compared to whites. African American males saw an increase from 38 cases in 2006 to 54 cases in 2007, a 42 percent increase. Since 2000, the annual number of new infections diagnosed among African American females has been stable at around 20 cases per year.

Among the estimated 5,950 people currently living with HIV in Minnesota, 22 percent or 1,299 African Americans were living with HIV. The rate among African Americans is 10 times the rate among whites.

“Differences in sexual behavior do not explain the disparities in the rates of HIV infection and other STDs experienced by African Americans,” said Carr. “A Centers for Disease Control and Prevention (CDC) study showed that sexual practices among whites and African Americans were the same. The disparities were more of a result of social and economic conditions within the community.”

In a report published last year by the National Minority AIDS Council – the premier national organization dedicated to addressing HIV/AIDS within communities of color – many of the underlying causes that contribute to higher rates of infection among African Americans were identified.

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Contributing factors cited in the report included limited incomes, lack of insurance, housing conditions, homelessness, cultural stigma, mistrust of the medical system, risk of incarceration, and marginalized social status. These factors all impair program effectiveness and play a part in higher infection rates, lower testing rates and limited access to prevention education and resources.

To help improve access, the STD and HIV Section at MDH currently funds 22 programs through 19 agencies aimed at preventing the spread of HIV in adults and young people of all races who inject drugs and/or engage in sexual behaviors that transmit HIV and other STDs. "It's important that we make HIV prevention programming and HIV and STD testing opportunities as economically and culturally accessible as possible to these communities," said Carr.

The Office of Minority and Multicultural Health at MDH provides funding to build capacity through eight community-based organizations working to impart knowledge and skills that affect individual abilities and organizational systems (including community) in the fight to eradicate HIV/AIDS.

In addition, MDH continues to support chlamydia and gonorrhea screening clinics and their outreach programs serving areas with the highest rates of infection in North and South Minneapolis. Local public health departments are also providing MDH prevention resources and campaign materials to their higher risk audiences.

Health officials emphasize that the best way to avoid being infected is to avoid sexual contact. If sexually active, you can reduce your risk by using condoms correctly, limiting the number of sexual partners, getting tested each year and by notifying your sexual partners if infected with STDs.

The bacterial STDs are curable with antibiotics but testing is the only way to know if you have an STD.

Many of the STDs, including HIV, initially don't show signs or symptoms and annual testing is important for those who are sexually active and their partners. There is no cure or vaccine against HIV infection but early detection can add years to one's life through anti-viral medications.

Free downloadable STD prevention posters and radio public service announcements are available at: <http://www.WrapTestTreat.com>.

The MDH HIV/AIDS and the STD Surveillance Reports-2007, which include data specific for African Americans, can be found on the MDH Web site at: <http://www.health.state.mn.us>.

For confidential information about the prevention, testing locations and treatment of STDs, call the Minnesota Family Planning & STD Hotline, toll free, at 1-800-78-FACTS (voice or TTY), 651-645-9360 (Metro area).

Information about HIV is also available from the Minnesota AIDS Project (MAP) AIDSLine, (612) 373-2437 (metro), and 1-800-248-2437 (statewide). MAP AIDSLine offers statewide information and referral services, including prevention education, HIV risk assessments, HIV testing and referrals to HIV testing sites, as well as community resources and prevention programs that serve the African American and African immigrant communities.

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